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ATTORNEY DOCKET NO. 3624-0161PUS1

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	<u></u> ■	COMBINATION OF GOLF CLUB	HEAD BODY AN	O STRIKING PLATE							
_	~	the specifications of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:									
Fill in Appropriate	e	the specification was filed on				as					
Information -		United States Application Numb	er			;					
For Use E	➾	and amended on			(if applical	ole); and/or					
Specification Attached:		the specification was filed on		as PCT							
		International Application Number	er e	; and was							
		amended on		(if applicable)							
		amended on		(n approach)							
		I hereby state that I have reviewed and by any amendment referred to above. I acknowledge the duty to disclose inf §1.56. I do not know and do not believe the thereof, or patented or described in any prior to this application, that the same was application, that the invention has not be application in any country foreign to the L more than twelve months (six months for on this invention has been filed in any corepresentatives or assigns, except as follow I hereby claim foreign priority benefor inventor's certificate listed below and has filing date before that of the application	formation which is made same was ever known intended publication in the same was ever known in the same was a	terial to patentability as define wn or used in the United State any country before my or or on sale in the United States o the subject of an inventor's ica on an application filed by application, and that no app United States of America pu	tes of America before ar invention thereof of America more than a certificate issued by me or my legal republication for patent or rior to this application d) of any foreign ap	of Federal Reference my or our or more than one year properore the diresentatives or inventor's on by me or opplication(s)	invention none year rior to this ate of this or assigns certificate r my legal				
Insert Priority Information:	⋗	Prior Foreign Application(s)		,		Priority Claim					
(if appropriate)		(Number)	(Country)	(Month / Day / Y	ear Filed)	Yes	No.				
		(Number)	(Country)	(Month / Day / Y	ear Filed)	Yes	No				
		(Number)	(Country)	(Month / Day / Y	ear Filed)	Yes	No T				
		(Number)	(Country)	(Month / Day / Y	ear Filed)	Yes	No				
Insert Provisional		I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.									
Application(s): (if any)		(Application Number)			(Fi	iling Date)					
		(Application Number)			(Fi	iling Date)					
		All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:									
Insert Requested Information:		Country		Application Number		Date of Filing (Month / Day / Year)					
Insert Prior U.S.		I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
Application(s): [6]	□	(Application Number)	(Filing	Date)	(Status - patented, pend	- patented, pending, abandoned)					
Page 1 of 2		(Application Number)	(Filing	Date)	(Status - patented, pend	ing, abandoned	i)				

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMPLETE THE FOLLOWING:		•							
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed	GIVEN NAME Chun-Yung, HUA		Chun-Yung, Hu	rang ·	DATE* March 18, 2004				
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see above	Residence (City, State		Oran jac j	CITIZENSHIP	March 18, 2004				
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Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	•	DATE*				
see ahove	Residence (City, State	& Country)	<u> </u>	CITIZENSHIP	<u> </u>				
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above	Residence (City, State	e & Country)		CITIZENSHIP	•				
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
Full Name of Fifth Inventor, if any	GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE		DATE*						
see above	Residence (City, State	e & Country)		CITIZENSHIP	·				
<i>,</i>	MAILING ADDRESS (Complete Street Address incl	uding City, State & Country)						
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